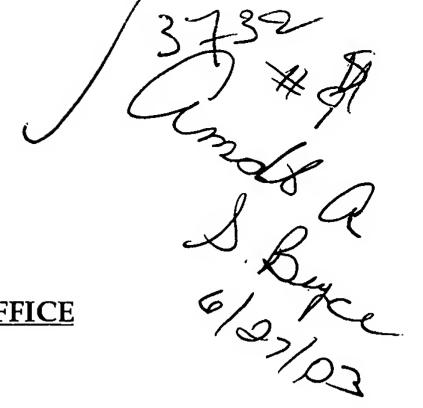


1



## UNITED STATES PATENT AND TRADEMARK OFFICE

**APPLICANT:** 

Gary J. Reed

**SERIAL NO.:** 

10/010,629

FILED:

November 7, 2001

FOR:

Orthopedic Stabilization

Device and Method

To:

Mail Stop AF

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

**ART UNIT: 3732** 

EXAMINER: Bonderer, D.

RECEIVED

JUN 2 4 2003

TECHNOLOGY CENTER R3700

## **AMENDMENT**

Sir:

Responsive to the Office Action dated December 16, 2002, kindly enter the following amendments:

06/20/2003 WABRHAM1 00000012 10010629

02 FC:2201

42.00 OP

TORNEY'S DOCKET NO. 31115-pa ne the application of: rial No.:

Gary J. Reed 10/010,629

November 7, 2001

Orthopedic Stabilization Device and Method

Mail Stop AF Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

Small entity status of this application under 37 C.F.R. 1.9 and 1.27 has been established by a verified statement previously filed.

A verified statement to establish small entity status under 37 C.F.R. 1.9 and 1.27 is enclosed.

 $\mathbf{X}\mathbf{X}$ No additional fee is required for the presentation of additional claims.

The fee has been calculated as shown below:

	(Col 1)		(Col 2)	(Col 3)Smal	l Entity	Entity:		Than A Entity:	
	Claims Remaining After Amendmen		Highest No. Previously Paid For	Present Extra	Rate	Addit. Fee	OR	Rate	Addit. Fee
Total:	11*	Minus	20**	0	x 9.=	\$0.00		x 18.=	\$0.00
Indep.:	4*	Minus	3 * * *	1	x 40.=	\$42.00		x 80.=	\$0.00
Total:						\$42.00			

<sup>\*</sup> If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid For" in this space is less than 20, write "20" in this space.

\*\*\*If the "Highest Number Previously Paid For" in this space is less than 3, write "3" in The "Highest Number Previously Paid For" (Total of Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 11-1734. A Duplicate copy of this sheet is enclosed.

Any additional filing fees required under 37 CFR 1.16 for the presentation of extra  $\mathbf{X}\mathbf{X}$ claims.

Any patent application processing fees under 37 CFR 1.17.

Dated: June 16, 2003

BERNHARD KRETEN, Reg. No. 27,037